

Food Establishment Inspection Report						Page 1 of 2	
Establishment Name: <b>WNMCP - Dining</b>		Physical Address: <b>2111 Lobo Canyon</b>		City: <b>Grants</b>	State: <b>NM</b>	Zip Code: <b>87020</b>	
Permit #: <b>002160</b>	Permit Expiration Date: <b>Oct 2020</b>	Phone:	Email:		Est. Type: <b>F</b>		
<b>As Governed by State Regulation 7.6.2 NMAC</b> <b>NMED Environmental Health Bureau</b> <b>121 Tijeras Ave. NE, Albuquerque NM 87102</b>			<b>Purpose of Inspection:</b> <input type="checkbox"/> Pre-Opening <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Complaint <input type="checkbox"/> Closing <input type="checkbox"/> Opening <input type="checkbox"/> Re-inspection <input type="checkbox"/> Investigation <input type="checkbox"/> CAR <input type="checkbox"/> Other <input type="checkbox"/> Initial Operational		<b>Risk Category:</b> Time In: <b>10:30</b> Time Out:		
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS							
Circle designated compliance status (IN, OUT, N/A) for each numbered item IN=in compliance    OUT=not in compliance    N/A=not applicable    Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection    R=repeat violation							
Compliance Status				Compliance Status			
Supervision				Protection from Contamination			
1	IN	OUT	Person in charge present, demonstrates knowledge, and performs duties	16	IN	OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food
2	IN	OUT	Certified Food Protection Manager	17	IN	OUT	N/A
Employee Health				Time/Temperature Control for Safety			
3	IN	OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting	19	IN	OUT	N/A
4	IN	OUT	Proper use of restriction & exclusion	20	IN	OUT	N/A
5	IN	OUT	Procedures for responding to vomiting and diarrheal events	21	IN	OUT	N/A
Employees				22	IN	OUT	N/A
6	IN	OUT	N/A	23	IN	OUT	N/A
Good Hygienic Practices				24	IN	OUT	N/A
7	IN	OUT	N/A	25	IN	OUT	N/A
8	IN	OUT	N/A	Consumer Advisory			
Preventing Contamination by Hands				26	IN	OUT	N/A
9	IN	OUT	N/A	Highly Susceptible Populations			
10	IN	OUT	N/A	27	IN	OUT	N/A
11	IN	OUT		Food/Color Additives and Toxic Substances			
Approved Source				28	IN	OUT	N/A
12	IN	OUT		29	IN	OUT	N/A
13	IN	OUT	N/A	Conformance with Approved Procedures			
14	IN	OUT		30	IN	OUT	N/A
15	IN	OUT	N/A	No. of Risk Factors / Intervention Violations			
Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.				No. of Repeat Risk Factors / Intervention Violations			
				8			
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance    Mark "X" in appropriate box for COS and/or R    COS=corrected on-site during inspection    R=repeat violation							
Safe Food and Water				Proper Use of Utensils			
31			Pasteurized eggs used where required	44			In-use utensils: properly stored
32			Water & ice from approved source	45			Utensils, equipment & linens: properly stored, dried, & handled
33			Variance obtained for specialized processing methods	46			Single-use/single-service articles: properly stored & used
Food Temperature Control				47			Gloves used properly
34			Proper cooling methods used; adequate equipment for temperature control	Utensils, Equipment and Vending			
35			Plant food properly cooked for hot holding	48			Food & non-food contact surfaces cleanable, properly designed, constructed, & used
36			Approved thawing methods used	49			Warewashing facilities: installed, maintained, & used; test strips
37			Thermometers provided & accurate	50			Non-food contact surfaces clean
Food Identification				Physical Facilities			
38			Food properly labeled; original container	51			Hot & cold water available; adequate pressure
Prevention of Food Contamination				52			Plumbing installed; proper backflow devices
39			Insects, rodents, & animals not present	53			Sewage & waste water properly disposed
40			Contamination prevented during food preparation, storage & display	54			Toilet facilities: properly constructed, supplied, & cleaned
41			Personal cleanliness	55			Garbage & refuse properly disposed; facilities maintained
42			Wiping cloths: properly used & stored	56			Physical facilities installed, maintained, & clean
43			Washing fruits & vegetables	57			Adequate ventilation & lighting; designated areas used
Reinspection: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date: _____				No. of Good Retail Practices Violations			
Corrective Action Response: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date: _____				No. of Repeat Good Retail Practices Violations			
Status: (check one)    Approved <input checked="" type="checkbox"/> Unsatisfactory <input type="checkbox"/> Immediate Closure <input type="checkbox"/> Voluntary Closure <input type="checkbox"/>				Person in Charge: (Signature) _____ Inspector: (Signature) _____    Date: <b>1/22/2022</b>			

## Food Establishment Inspection Report

Page 2 of 2

As Governed by State Regulation 7.6.2 NMAC  
 NMED Environment Health Bureau  
 121 Tijeras Ave NE, Albuquerque NM 87102

Establishment Name:

W N M C F  
 Jimmy B

Permit #:

002160

## TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Holding	142°F				
Vegetables	136°F				
Mac	134°F				
Meat	141°F				
Refrigerator	-9°F				

## OBSERVATIONS AND CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames below, or as stated in section 8-405.11 of the Food Code.

Item  
Number

Note: No Violations noted

Person in Charge: (Printed)

Inspector: (Printed)

Ramon Dros

Person In Charge: (Signature)

Inspector: (Signature)

Date: 1/22/2020

## Food Establishment Inspection Report

Page 1 of 2

Establishment Name: <b>WNMCF</b>	Physical Address: <b>2111 Lobo Canyon Rd</b>	City: <b>Grants</b>	State: <b>NM</b>	Zip Code: <b>87020</b>
Permit #: <b>000115</b>	Permit Expiration Date: <b>04/2020</b>	Phone:	Email:	Est. Type: <b>I</b>



As Governed by State Regulation 7.6.2 NMAC  
NMED Environmental Health Bureau  
121 Tijeras Ave. NE, Albuquerque NM 87102

## Purpose of Inspection:

<input type="checkbox"/> Pre-Opening	<input checked="" type="checkbox"/> Annual	<input type="checkbox"/> Complaint	<input type="checkbox"/> Closing
<input type="checkbox"/> Opening	<input type="checkbox"/> Re-Inspection	<input type="checkbox"/> Investigation	<input type="checkbox"/> CAR
<input type="checkbox"/> Other	<input type="checkbox"/> Initial Operational		

## Risk Category:

Time In:	<b>10:30</b>
Time Out:	

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN=in compliance OUT=not in compliance N/A=not observed N/A=not applicable

COS=corrected on-site during inspection

R=repeat violation

Compliance Status		COS	R
<b>Supervision</b>			
1 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Person in charge present, demonstrates knowledge, and performs duties		
2 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Certified Food Protection Manager		
<b>Employee Health</b>			
3 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of restriction & exclusion		
5 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Procedures for responding to vomiting and diarrheal events		
<b>Employees</b>			
6 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food Handler Cards		
<b>Good Hygienic Practices</b>			
7 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Proper eating, tasting, drinking, or tobacco use		
8 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	No discharge from eyes, nose, and mouth		
<b>Preventing Contamination by Hands</b>			
9 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Hands clean & properly washed		
10 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	No bare hand contact with RTE foods or pre-approved alternative procedure properly followed		
11 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing sinks; supplied & accessible		
<b>Approved Source</b>			
12 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source		
13 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Food received at proper temperature		
14 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Food in good condition, safe, & unadulterated		
15 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Required records available: shellstock tags, parasite destruction		
<b>Protection from Contamination</b>			
16 <input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food		
17 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food-contact surfaces; cleaned & sanitized		
18 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Food separated & protected		
<b>Time/Temperature Control for Safety</b>			
19 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper cooking time & temperatures		
20 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper reheating procedures for hot holding		
21 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper cooling time & temperature		
22 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper hot holding temperatures		
23 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper cold holding temperatures		
24 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Proper date marking & disposition		
25 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/A	Time as a Public Health Control; procedures & records		
<b>Consumer Advisory</b>			
26 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Consumer advisory provided for raw/undercooked foods		
<b>Highly Susceptible Populations</b>			
27 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered		
<b>Food/Color Additives and Toxic Substances</b>			
28 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food additives: approved & properly used		
29 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Toxic substances properly identified, stored, & used		
<b>Conformance with Approved Procedures</b>			
30 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Compliance with variance / specialized process / HACCP		

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

No. of Risk Factors / Intervention Violations

0

No. of Repeat Risk Factors / Intervention Violations

0

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS=corrected on-site during inspection

R=repeat violation

Safe Food and Water		COS	R
31	Pasteurized eggs used where required		
32	Water & ice from approved source		
33	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>			
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39	Insects, rodents, & animals not present		
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41	Personal cleanliness		
42	Wiping cloths: properly used & stored		
43	Washing fruits & vegetables		
<b>Proper Use of Utensils</b>			
44	In-use utensils: properly stored		
45	Utensils, equipment & linens: properly stored, dried, & handled		
46	Single-use/single-service articles: properly stored & used		
47	Gloves used properly		
<b>Utensils, Equipment and Vending</b>			
48	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
49	Warewashing facilities: installed, maintained, & used; test strips		
50	Non-food contact surfaces clean		
<b>Physical Facilities</b>			
51	Hot & cold water available; adequate pressure		
52	Plumbing installed; proper backflow devices		
53	Sewage & waste water properly disposed		
54	Toilet facilities: properly constructed, supplied, & cleaned		
55	Garbage & refuse properly disposed; facilities maintained		
56	Physical facilities installed, maintained, & clean		
57	Adequate ventilation & lighting; designated areas used		

## Reinspection:

Yes ☐No ☒

Date:

## Corrective Action Response:

Yes ☐No ☒

Date:

No. of Good Retail Practices Violations

0

No. of Repeat Good Retail Practices Violations

0

Status: (check one)

Approved ☒Unsatisfactory ☐Immediate Closure ☐Voluntary Closure ☐

Person in Charge: (Signature)

Inspector: (Signature)

Date: 1/22/2020

## Food Establishment Inspection Report

Page 2 of 2

As Governed by State Regulation 7.6.2 NMAC  
NMED Environment Health Bureau  
121 Tijeras Ave NE, Albuquerque NM 87102

Establishment Name:

WNUMCF - Maito

Permit #:

000115

## TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Meat	135°F				
Mac	132°F				
Vegetables	140°F				
Hot Holding	152°F				
Walk in Freezer	15°F				
Walk in Cooler #2	36°F				
Walk in Cooler #3	40°F				

## OBSERVATIONS AND CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames below, or as stated in section 8-405.11 of the Food Code.

Item  
Number

Note! No violations noted.

Person in Charge: (Printed) Belen Estuero

Person in Charge: (Signature)

FSD

Inspector: (Printed)

Ramon Orosco

Inspector: (Signature)

Date: 1/22/2022

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